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Bib Data Sheet

CONFIRMATION NO. 9683

SERIAL NUMBER 10/780,050	FILING DATE 02/17/2004 RULE	CLASS 379	GROUP ART UNIT 2614	ATTORNEY DOCKET NO. 1707JB.036732
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APPLICANTS

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** CONTINUING DATA *****

This application is a CON of 09/978,270 10/15/2001 PAT 6,700,957
which is a CIP of 09/206,716 12/07/1998 PAT 6,298,122

** FOREIGN APPLICATIONS *****

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 05/13/2004

** SMALL ENTITY **

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	STATE OR	SHEETS	TOTAL	INDEPENDENT
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	COUNTRY	DRAWING	CLAIMS	CLAIMS
Verified and Acknowledged Examiner's Signature _____ Initials _____	TX	6	12	2

ADDRESS

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TITLE

Caller ID system with retransmitted caller ID information

FILING FEE RECEIVED 585	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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